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| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).   |                  |                       |         | Complete if Known                       |   |                          |          |           |
|---|------------------|-----------------------|---------|---|---|--------------------------|----------|-----------|
|   |                  |                       |         | Application Nur                         | Application Number 10/542,951-Conf. #2017 |                          |          |           |
| FEE TRANSMITTAL   |                  |                       |         | Filing Date                             |   | July 21, 2005            |          |           |
| For FY 2009   |                  |                       |         | First Named Inv                         | /entor                                    | Ali Kaan Kalkan          |          |           |
| TOIF1 2009  |                  |                       |         | Examiner Name                           |   | J. C. Langman            |          |           |
| X Applicant claims small entity status. See 37 CFR 1.27   |                  |                       |         | Art Unit 1794                           |   |                          |          |           |
| TOTAL AMOUNT OF PAYMENT (\$) 470.00   |                  |                       |         | Attorney Docket No. PST-29202/36        |   |                          |          |           |
| METHOD OF PAYMENT (check all that apply)  |                  |                       |         |   |   |                          |          |           |
| Check x Credit Card Money Order None Other (please identify):   |                  |                       |         |   |   |                          |          |           |
| Deposit Account Deposit Account Number: 07-1180 Deposit Account Name: Gifford, Krass, Sprinkle, Anderson & Cilkonski, P.C.  |                  |                       |         |   |   |                          |          |           |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |                  |                       |         |   |   |                          |          |           |
| Charge fee(s) Indicated below Charge fee(s) indicated below, except for the filling fee   |                  |                       |         |   |   |                          |          |           |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  |                  |                       |         |   |   |                          |          |           |
| FEE CALCULATION   |                  |                       |         |   |   |                          |          |           |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES   |                  |                       |         |   |   |                          |          |           |
| FILING FEES SEARCH FEES EXAMINATION FEES  |                  |                       |         |   |   |                          |          |           |
| Application Ty  | /pe Fee (S       | Small Entity Fee (\$) | Fee (\$ | <u>Small Entity</u><br><u>  Fee (S)</u> | Fee (\$                                   | Small Entity<br>Fee (\$) | Fees F   | Paid (\$) |
| Utility   | 330              | 165                   | 540     | 270                                     | 220                                       | 110                      |          |           |
| Design  | 220              | 110                   | 100     | 50                                      | 140                                       | 70                       |          |           |
| Plant   | 220              | 110                   | 330     | 165                                     | 170                                       | 85                       |          |           |
| Reissue   | 330              | 165                   | 540     | 270                                     | 650                                       | 325                      |          |           |
| Provisional   | 220              | 110                   | 0       | 0                                       | 0   | 0                        |          | ,         |
| 2. EXCESS CLAIM FEES Small Entity   |                  |                       |         |   |   |                          |          |           |
| Fee Description Fee (\$)  |                  |                       |         |   |   |                          |          |           |
| Each claim over 20 (including Reissues) 52  |                  |                       |         |   |   |                          | 26       |           |
| Each independent claim over 3 (including Reissues)  |                  |                       |         |   |   |                          | 220      | 110       |
| Multiple dependent claims 390 195   |                  |                       |         |   |   |                          |          |           |
| Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  |                  |                       |         |   |   |                          |          | -         |
| 11 - 20 or HP x = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.   |                  |                       |         |   |   |                          |          |           |
| Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)   |                  |                       |         |   |   |                          |          |           |
|   |                  |                       |         |   |   |                          |          |           |
| HP = highest number of independent claims paid for, if greater than 3.  |                  |                       |         |   |   |                          |          |           |
| 3. APPLICATION SIZE FEE   |                  |                       |         |   |   |                          |          |           |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                  |                       |         |   |   |                          |          |           |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)   |                  |                       |         |   |   |                          |          |           |
| 100 = /50 = (round up to a whole number) x =  |                  |                       |         |   |   |                          |          |           |
| 4. OTHER FEE(S)  Fees Paid (S)  New Familia: Service Station F120 for (no small outity discount)  |                  |                       |         |   |   |                          |          |           |
| Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 2251 Extension for response within first month 65.00  |                  |                       |         |   |   |                          |          |           |
| 2801 Request for continued examination (RCE) (see 37 405.00   |                  |                       |         |   |   |                          |          |           |
| SUBMITTED BY  |                  |                       |         |   |   |                          |          |           |
| Signature   | /Avery N. Goldst | ein, Ph.D./           |         | Registration No.<br>(Attorney/Agent)    | 39,204                                    | Telephone                | (734) 91 | 3-9300    |
| Name (Print/Type) Avery N. Goldstein, Ph.D.   |                  |                       |         |   |   | Date                     | March 1  | , 2010    |